

JAN 30 2008

# NEVADA FINANCIAL DISCLOSURE STATEMENT (FDS)

(Please read the instructions before completing.)

COMMISSION  
ON ETHICS

## PERSONAL INFORMATION:

|   |   |
|---|---|
| NAME: Mary Kathryn Baker                | LENGTH OF RESIDENCE IN NEVADA: 52 years   |
| ADDRESS: 1677 Hot Springs Road, Suite A |   |
| CITY, STATE, ZIP: Carson City, NV 89706 | LENGTH OF RESIDENCE IN DISTRICT WHERE REGISTERED TO VOTE (NRS 281A.620(1)(a)): 23 |
| TELEPHONE: 775.687.5049                 | E-MAIL: mkbaker@parole.nv.gov   |

**SECTION A (Public Office):** List all public offices for which this financial disclosure statement is required [NRS 281A.620.1(g)] and check each box accordingly i.e. annual, candidate or appointment filing:

- **ANNUAL** all elected and appointed public officers (no later than Jan. 15 each year)
- **CANDIDATE** (no later than the 10<sup>th</sup> day after the last day to qualify as a candidate)
- **APPOINTMENT** to fill unexpired term of an elected or appointed public officer (within 30 days)

| <u>Public Office</u>                 | Elected, Appointed or<br>Appointed to Elective<br>(E, A or A/E) | Annual<br>Compensation | Term or<br>Date Appointed | ANNUAL<br>NRS<br>281A.600.1(b)<br>281A.610.1(b) | CANDIDATE<br>NRS<br>281A.610.1(a) | APPOINTMENT<br>NRS<br>281A.600.1(a) |
|--------------------------------------|---|------------------------|---------------------------|---|-----------------------------------|-------------------------------------|
| Nevada Board of Parole Commissioners | A   | \$ 84,397.00           | 01/11/08                  | <input type="checkbox"/>                        | <input type="checkbox"/>          | <input checked="" type="checkbox"/> |
|                                      |   | \$                     |                           | <input type="checkbox"/>                        | <input type="checkbox"/>          | <input type="checkbox"/>            |
|                                      |   | \$                     |                           | <input type="checkbox"/>                        | <input type="checkbox"/>          | <input type="checkbox"/>            |

**SECTION B (Sources of Income):** List each source of your income (including any source listed in Section A), or that of any member of your household who is 18 years of age or older. [NRS 281A.620.1(b)]:

|                                      | Self                                | Household<br>Member                 |
|--------------------------------------|-------------------------------------|-------------------------------------|
| Nevada Board of Parole Commissioners | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| Federal Retirement                   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| Sierra Car Care                      | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
|                                      | <input type="checkbox"/>            | <input type="checkbox"/>            |

**SECTION C (Real Property):** List specific location and particular use of all real estate (other than personal residence): (1) in which you or a member of your household has a legal or beneficial interest; (2) the fair market value of which is \$2,500 or more; and (3) located in this state or an adjacent state [NRS 281A.620.1(c)]:

| <u>Specific Location</u> | <u>Particular Use</u> |
|--------------------------|-----------------------|
| None.                    |                       |
|                          |                       |
|                          |                       |
|                          |                       |
|                          |                       |

Mary Kathryn Baker

**Print Name of Public Officer**

**SECTION D (Creditors):** List each creditor to whom you or a member of your household owes \$5,000 or more [EXCEPT: (1) debt secured by mortgage or deed of trust on real property which is not required to be listed in Section C above; and (2) debt for which a security interest in a motor vehicle for personal use was retained by seller] [NRS 281A.620.1(d)]:

|       | Self                     | Household Member         |
|-------|--------------------------|--------------------------|
| None. | <input type="checkbox"/> | <input type="checkbox"/> |
|       | <input type="checkbox"/> | <input type="checkbox"/> |
|       | <input type="checkbox"/> | <input type="checkbox"/> |
|       | <input type="checkbox"/> | <input type="checkbox"/> |

**SECTION E (Gifts):** List the identity of donor and value of each gift of all gifts received in excess of an aggregate value of \$200 from a donor during the preceding taxable year [EXCEPT: (1) a gift received from a person who is related to you within the third degree of consanguinity or affinity; and (2) ceremonial gifts received for a birthday, wedding, anniversary, holiday or other ceremonial occasion if the donor does not have a substantial interest in your legislative, administrative, or political action] [NRS 281A.620.1(e)]:

| <u>Donor</u> | <u>Gift</u> | <u>Value of Gift</u> |
|--------------|-------------|----------------------|
| None.        |             | \$                   |
|              |             | \$                   |
|              |             | \$                   |
|              |             | \$                   |

**SECTION F (Business Entities):** List each business entity (i.e., organization or enterprise operated for economic gain, including a proprietorship, partnership, firm, business, trust joint venture, syndicate, corporation or association) with which you or a member of your household is involved as a trustee, beneficiary of a trust, director, officer, owner in whole or in part, limited or general partner, or holder of a class of stock or security representing 1% or more of the total outstanding stock or securities issued by the business entity [NRS 281A.620.1(f)]:

|       | Self                     | Household Member         |
|-------|--------------------------|--------------------------|
| None. | <input type="checkbox"/> | <input type="checkbox"/> |
|       | <input type="checkbox"/> | <input type="checkbox"/> |
|       | <input type="checkbox"/> | <input type="checkbox"/> |
|       | <input type="checkbox"/> | <input type="checkbox"/> |

**THE INFORMATION I HAVE PROVIDED HEREIN IS ACCURATE AND COMPLETE.**

Date: 1/28/08

Signature:

Print name:

Mary Kathryn Baker

**FILE COMPLETED FORM WITH:**

Appointed Public Officers

Nevada Commission on Ethics  
3476 Executive Pointe Way, Suite 10  
Carson City, Nevada 89706  
775.687.5469 • 775.687.1279 fax

Elected Public Officers and Candidates for Public Office

Nevada Secretary of State, Elections Division  
101 North Carson Street, Suite 3  
Carson City, Nevada 89701  
775.684.5705 • 775.684.5718 fax